

Cases of Serious Disease Saved from Operation

CHIEFLY BY ARBORIVITAL REMEDIES

WITH

APPENDIX ON SYSTEMATIC PROGRESS IN
MEDICINE

An Arborivital Remedy is one whose action can only be explained, by supposing a hidden force to exist in plants that is not demonstrable to the senses, and that is independent of any special mode of preparation

BY

ROBERT T. COOPER, M.A., M.D.

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and late Vice-President and Fellow, British Homœopathic Society*

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THE triumphs of medicine are little considered in comparison with those of war, the reason being that it is difficult to keep the grand achievements of medicine constantly before one's eyes, while the difficulty with successful military feats is to prevent ourselves from being over-dazzled by their brilliancy.

Moreover, the nearer an achievement in the domain of medicine approaches in its aspects to a success in the battle-field, the more a great deal does it call forth the delight of the multitude ; the military operation and the surgical operation command the admiration of every looker on.

It is the same in the religious world ; the glamour connected with the career of that noble, devout, and sword-bearing General Gordon overshadows the silent work of the unambitious and equally devout missionary ; the one becomes known to all men, the life's work of the other passes away unrecognised.

A War-cry, and a War-cry alone, is accountable for the greatest religious movement of modern days amongst those who, true to their principles, necessarily aim at Peace. It is found necessary to don the armour of war, in order to accomplish the behests of Peace ! Alas, that it should be so !

From its being unostentatious—such is the nature of things !—little credit is given to curative medicine for its triumphs ; and its still small voice is wafted away unheard amidst the roar of life's storm.

I have been often requested to let it be more widely known what medicine can really effect, and recently have been particularly asked to do so by the parents of the little boy whose case, as follows, well illustrates how difficult it is for the powers of really curative medicine to obtain sufficient recognition.

A little boy was born to these people, and when two

years old, symptoms set in which completely baffled their medical attendant, an old-school practitioner ; he requested a consultation, but it ended without much light being thrown upon the case. Some weeks after, as the child grew worse, the advice of a specialist was obtained. This gentleman discovered a tumour which proved to be sarcomatous, a form of cancer, in connection with the left kidney, and pronounced the case to be then beyond the reach of even operation. This it proved to be by the child dying at the early age of 2 years and 9 months ; the *post-mortem* examination confirmed the diagnosis.

CASE I. CANCER PROBABLY PREVENTED.

Another boy was born to these parents, who developed exactly the same symptoms at precisely the same age, 2 years, viz., loss of flesh, irritability of temper, general fretfulness, and changeableness of disposition, with obscure pain in the abdomen, albuminous and cloudy urine, &c.

They placed him under me, and for these symptoms I prescribed various remedies from time to time, with the result that the child's disposition quite altered, the urine

cleared, he became plump and healthy looking, and is now at 4 years old, apparently as healthy a child as there is in the County of London.

I did not keep complete notes of his case, but the remedies given were, amongst others, *Digitalis*, *Anchusa sempervirens*, *Draba verna*, *Pulmonaria officinalis*, *Alnus glutinosa*, &c. The case is given as showing the difficulty in getting credit for what medicine has done, for who can say the second little boy would have drifted into the same condition of sarcomatous infection as the first, and that his life would have terminated in like manner ? The parents are convinced that he would have done so, but this is no evidence ; and for what most likely was a glorious triumph, medicine gets little renown. I have in pamphlets on what I term the “ Arborivital Action of Medicines,” explained the principles upon which, in Chronic Disease, medicines act, and which it is here unnecessary to repeat. These pamphlets are :— “ The Problems connected with Homœopathy Solved (General Diseases),” and “ Arborivital Medicine (the Diseases of the Ear),” either of which I shall be glad to send to inquirers.

CASE II. CARIOUS ELBOW JOINT.

About ten or eleven years ago, a lad of 12 years of age was brought to me with a carious elbow, which discharged from several openings. I had good reason to remember the case, for at the time I was physician for diseases of the ear at the London Homœopathic Hospital, and his was the only case outside of my speciality I had seen at the hospital for the seventeen years during which I was connected with this institution. I gave *calcareo carbonica* 3rd. dec. internally in repeated doses, with an ointment of *scrophularia nodosa* locally.

In a fortnight after, I saw the boy, and his mother reported him improved and requested an opinion as to change of air, which had before done him good, and the prescription of medicine for a longer period than usual.

This was all I heard of this patient until after eight years his aunt sent for me ; then, but not till then, I learned that the boy's elbow had got quite well, his arm being apparently as strong as if it had never been diseased, and that before I had seen it the elbow had been condemned to operation by no less than seventeen medical advisers.

This I look upon as a great triumph, though the simplicity of the treatment and its unostentatious character pre-

vent my getting anything like the credit that is deserved. That an arm is saved to a man who has to earn his bread is no small matter, and deserves at the very least some less tardy recognition than modified thanks at the end of eight years ; thanks that to say the least were *untimely* !

CASE III.—EXCESSIVE METRORRHAGIA.

His aunt sent for me under these circumstances ; she had suffered from metrorrhagia for some two years and was reduced to such a condition of anæmia and weakness that an operation was declared by three medical advisors to be necessary.

A large tumour existed on the right side, but this, it was not intended, as I understood, to interfere with, as her strength would not permit of it. The operation contemplated was that of curetting the interior of the womb. In this case also an operation was prevented by the timely administration of *Lycopodium*, *Arnica montana*, *Veratrum viride* internally, together with, in the early days of the treatment, simple local applications of infusion of common sage and of green tea. The periods from being excessive became regular, and the tumour from being by its weight a

source of great inconvenience, almost ceased to incommode her. The argument held forth by her former medical attendants in favour of operation, was that it would have been dangerous to life to pass through another period, the loss at these times having been so great ; still she did pass through it, and without harm.

This patient remained under observation some eighteen months, during most of which time she was able to go about her household duties, and often to walk five or six miles a day, and when at the end of this time my attendance upon her ceased, the periods were scanty rather than otherwise, the tumour smaller, and her general condition vastly improved.

This then was a clear case of a patient being saved from operation ; a great triumph for the curative action of remedies, and a complete refutation of those who do not believe in medicine, but many of whom, I might add, often prescribe it very largely ; in fact, sometimes in inverse proportion to their belief in it !

CASE IV.—CARIOUS BONE.

On June 6, 1896, a lady wrote me thus :—" What is your opinion of the following case ? Baby (boy) born last

April twelve months, beautiful and healthy in every respect, later on abscesses became frequent and then the bones became diseased and bone particles were taken away ; the child has continued to grow and is really a beautiful child in appearance and size ; now an abscess has formed on the left side, it develops and breaks, and then inflammation subsides for a time ; again abscess re-forms and so goes on ; the prevailing view is another operation for diseased bone. My question,” the lady writes, “ is, can't this disease be arrested before the bone is attacked, and thus operation be avoided ? At present operation is considered unavoidable ; a sore place has started behind one ear.” For this condition I gave some *Symphytum officinale* ϕ A., which was taken on June 10, and requested further particulars ; these were sent in this letter from his mother dated June 26, 1896 :—

“ DEAR SIR,—Mrs. D. kindly wrote to you about my baby, and also sent me a powder which I gave the baby a fortnight ago.

“ I am now writing to give you a report of the child, as I understood that you wished one sent in about ten days' time.

“ Since Mrs. D. wrote to you, baby has had eczema

out on his ears, both sides of his neck, and into his head also under his knees. This he had out before I gave him the powder.

“ Yesterday and to-day eczema seems slightly better, and looks like drying up, but the discharge from the old abscess under the left nipple is the same as it has been for months. The only difference is that the place has not come to a head lately ; it used to do that once a fortnight and then break.

“ Baby is cutting his eye teeth and some double ones, and my nurse and I get very little sleep at night with him.

“ The doctor here thinks it will be most likely necessary to have the side operated on again, but I am not sure if he is right, as the last operation was not successful. Baby has had twelve abscesses lanced and two severe operations to remove diseased bone.”

The effect of the *Symphytum officinale* I considered by this report to be very pronounced ; it lessened the irritation of the eczema and prevented the abscess from coming to a head—two very important effects.

In reply to this letter, I sent off a dose of *Calcarea carb.* CC., and a powder of *Kali hydriodicum* CC. to be dissolved in half a tumbler of water and to be taken in sips when teething.

After this the child made an uninterrupted recovery, and the last report (January 23, 1897) is : “ Baby is better and growing a strong boy ; ” a previous account having been that all traces of abscess had left.

CASE V. IMMENSE FIBROUS TUMOUR GIVING RISE TO
GREAT PAIN.

Close by where this child lived was a very interesting case, about which the same lady wrote, asking me to recommend an institution in town in which this woman could be operated upon.

As this woman, Mrs. A., was then suffering intense pain, I advised her taking some remedies for the pain before thinking of an operation. Her case, in reply to a letter from me, ran thus :—

“*October 16, 1895.*

“ SIR,—Many thanks for your kind letter received this morning. I must say that in the first place I have a fibrous tumour in the womb, which I have had for years, and at times suffered very much with.

“ In May, 1887, I had a disease fall on my eyes (glaucoma), and was in the Royal Westminster Ophthalmic Hospital, Chandos Street. There I had one eye operated

upon, and had them bad for some time. Then they wanted to take the eye out, but I felt I could not have that done. I was then advised to go to the London Homœopathic Hospital, which I did in June, and very thankful I am that I did, for after a time they got much better.

“ About two years after, as an in-patient at the same hospital with the other eye, I got better without any operation.

“ Now as regards this last trouble. It was six weeks ago last Friday—I had previously been feeling very unwell, not an unusual thing with me—I was taken with intense pain in the pit of the stomach, seemed like being drawn up with cords, then shooting pains through my breasts and up under my arms, and through to my back, that lasted four hours ; after that I was easy for about an hour or two, then they came on again about half-past eight and lasted till three o'clock ; then I was sick and brought up a great deal that smelt very bad indeed ; then I was two or three days and had another attack, then stopped a week ; then another, and so on until last Sunday. Then I had one in the afternoon, and another in the evening, and another on Monday afternoon, and yesterday, one in

the afternoon and another in the evening ; but yesterday I could not bring anything up to speak of. After the vomiting I get ease at once and am quite exhausted and can go to sleep directly. Then another thing is, I have had the most dreadful irritation all over my body, but more especially in the palms of my hands and the soles of my feet, and at times it seems quite unbearable ; not anything to be seen, but the skin is very dry and hot.

“ Another thing is the urine, which is very deep colour and very yellow.”

The letter goes on to express her conviction of its being necessary to go into hospital, and concludes by saying :—

“ I had a very restless and sleepless night last night, and am feeling sick this morning ; very little appetite and almost afraid to take anything.”

However, instead of going into a hospital, all these pains so far lessened under treatment that on December 3, 1895, she was able to come up and see me, and then I found that she was suffering from an immense tumour, that by its weight alone was dragging her down fearfully, and which filled the entire upper pelvis and lower abdomen.

Her age was 58, and the change of life had taken place twelve years back, at which time she had begun to suffer ;

and it was then that the tumour was discovered, and was supposed to have existed much longer. Her present state is as follows :—

Continual pain and weight in the pit of the chest, less in the morning ; gets worse after taking food, has to loosen her clothes and lie down. The attacks of pain were more severe before taking my remedies, but now they hang about more ; she has less sickness and consequently less relief from her distress. Scarcely ever gets a night's rest ; dreadful irritation all over the body—hands and all—worse at night. Warmth brings it on. Bowels acting.

The real treatment of the case may be said to have now begun. I explained to her the serious nature of her disease, and how very simple my treatment would be, did she elect to remain under me ; that the only alternative was a serious operation, for which, as she was now in town, she could make arrangements, and that for myself I naturally advised a pursuance of the same treatment as had already been partly adopted, although her case would put medical treatment to the severest possible test. She elected to remain under me, and I began by giving *Atropa Belladonna* ϕ A. with a prescription for *Magnesia Carbonica* CC. Two tablets every third hour if in pain.

December 20, 1895.—Is very much better ; for three days has not had sufficient pain to necessitate taking the tablets. Has been much on her feet lately, which has caused great bearing down. *Nil.*

January 27, 1896.—Up to two weeks ago was better, but since then has had pain every day, and the tablets do not relieve as they did. Last Saturday had a very bad turn after dinner (early), which lasted till nine o'clock and was very sick, and now irritation is as bad as ever. Last night never slept the whole night through.

Sent *Daphne mezereum* ϕ A.

After this the irritation of the skin improved, but the pain returned and she was much troubled with flatus, for which, treatment was given with more or less relief. On April 20 she still complained of great pain with retching, and sickness, and irritation of the skin, all the symptoms being worse after meals.

For this *Cephaelis Ipec.* ϕ A. was given, and it is no exaggeration to say that since then she has made an almost uninterrupted and a truly marvelous recovery.

I have heard but twice directly from her since April, but indirectly get constant reports. One of these times that she herself wrote was on May 25, 1896, and her letter runs thus :—

“ I heard from Mrs. D. the other day, and she told me that you thought I ought to write oftener to you ; why I do not is because I am careful not to trouble you more than I can possibly help and until I feel much worse. I feel better and am quite sure your treatment is doing me good ; I am less in size and have the pain less, can eat better and not feel so sick. Is not all this very encouraging ? ”

The next occasion of her writing to me was on June 17 1896, when she asked for medicine as she had had some threatenings of pain.

A mutual friend writes under date January 23, 1897 :—

“ I saw Mrs. A., who is better than she has been for years ; has had hardly any pain for a month or more ; she says it is wonderful, she is almost afraid of speaking of it.”

Here, then, is a case literally snatched from the knife of the surgeon ; the patient is very thankful, but there the matter ends.

Our hospitals could not exist if such patients were treated at home in this simple way, consequently such treatment does violence to existing interests.

CASE VI. LUPOID GROWTH ON THE CHEEK.

Mrs. ——— aged 64, has had for four years a large lobulated growth on the left cheek, below the eye, of the circumference of a shilling, and which began as a seedy wart ; this wart still remains projecting from the lower part of the growth. She has been strongly advised to have it cut out.

On December 28, 1896, I was first consulted, and then gave Ferrum picricum, 3rd dec., which was well indicated (*vide* author's paper at Congress of Homœopathic Practitioners, 1896), and in the middle of January she reported a great improvement in every respect. The growth, which used to cause much pain, especially on bending her head forward, was then painless and about half its original size, and her general health had greatly improved.

The medicine, she said, began to work at once, and brought on pain in the muscles of the back of the neck which spread all over the head, being especially severe on the left side and in the region of the growth ; this continued for three or four days and then left. The growth is now (February 6) a fourth its original size, black-looking and shrivelled, and evidently dropping off.

CASE VII. PAINFUL SPASMODIC AFFECTION OF THE
FEET.

Louisa T., aged 17. Date of case, May 21, 1896. This girl on coming out of a Fever Hospital was given tight boots to wear, which caused her toes to turn under, the consequence being that for the last nine years she has suffered from painful feet. She has been discharged from several situations owing to her inability to continue long on her feet, and two years ago her second toe on each foot was amputated in the hope of relieving her. Her feet ache when she tries to walk—they turn under her. At the Orthopædic Hospital she was thought to have tubercle disseminated in the bones, and was examined by the Röntgen rays without anything having been discovered. It was then proposed to bind up the feet in irons. Weather makes no difference to the condition of her feet, and her general health is good. On May 28, 1896, *Symphytum officinale* ϕ A. was given, and she went on improving with scarcely a remission until on January 14, 1897, it was repeated, and on the 21st she writes :—

“ My feet are much better and I find they now only ache at night ; ” this, considering she is hard at work in a situation as kitchenmaid is to say, the least, satisfactory.*

* Report, 25th February : “ I am quite well now.”

During the interval between May 28 and January, 1897, she has certainly had other remedies as indications offered, viz., *Ruta graveolens*, *Atropa belladonna*, *Crocus sativus*, but from none of these could any effect on the feet be traced.

CASE VIII. SHORTENED TENDONS.

A lady asked me to try and do something in this case ; the patients mother writes January 15, 1896 :—

“ My little girl is now turned 5 years old, and the doctors tell me she is short of muscle, grows very tall, and does not seem to walk any better though turned five, it makes her such a tie ; never to be able to go out without carrying her is no easy work. She puts her toes only to the ground.”

Calcareo carbonica CC. was first given, and on February 7, 1896, report runs :—“ The little girl is less fretful, more cheerful generally ; she does not yet put her feet to the ground, but trips on her toes, and always seems as though she wants to catch hold of something to avoid falling.”

This was followed up by *Pinus sylvestris*, *Kali hydriodicum*, and other remedies ; and on October 6, *Symphytum officinale* ϕ A. was given.

On November 3, 1896, this report comes in :—

“ Before taking the powder my little girl seemed to tremble when she stood up, and fall a good bit as if her legs were too weak to bear up her body ; since taking the powder she is more placid, not so fretful ; sleeps very fairly, and if she can get out during the day is more cheerful, and she certainly stands more firmly on her legs than she did before taking the medicine.”

On January 12, 1897, report comes in :—

“ The little girl greatly recovered firmness in standing and moving ; previously to taking the powder was very uncertain on her feet and fell constantly ; this is over, though she still remains feeble in walking ; she is altogether better.”

The object in reporting this collection of cases is simply to illustrate the fact that medicines can save from operations, and not for the purpose of entering upon and inquiring as to the effect of any one remedy. Still the temptation is irresistible to call up a case illustrative of the common comfrey, the *Symphytum officinale*. In Cases IV., VII., and VIII., the effect of *Symphytum* in relieving ailments connected more or less

with bone is brought into prominence, and I would have left to a future occasion the consideration of this property were it not for the recent beautiful illustration of its action on bony structures, which is going the round of the medical papers.

CASE IX. SARCOMATOUS TUMOUR INFILTRATING THE
BONY TISSUE OF THE UPPER JAW.

Dr. William Thomson, President of the Royal College of Surgeons in Ireland, delivered an address in Dublin on November 13, 1896, entitled, “ Some Surprises and Mistakes,” in which the following very important case was narrated :—

“ In the early part of this year I saw a man who was suffering from a growth in the nose. I recommended him to see Dr. Woods, and I saw him later with Sir Thornley Stoker and Dr. Woods. We came to the conclusion that he was suffering from a malignant tumour of the antrum which had extended to the nose. We recommended an exploratory operation, and if our opinion was confirmed, that the jaw should be at once removed. He refused the larger operation. The exploration was made by Dr. Woods. We found that the tumour did extend from the

antrum, into which I could bore my finger easily. Dr. O'Sullivan, Professor of Pathology of Trinity College, declared the growth to be a round-celled sarcoma. Of that there is no doubt. The tumour returned in a couple of months, and the patient then saw Dr. Semon in London, who advised immediate removal of the jaw. He returned home, and after a further delay he asked to have the operation performed. I did this in May last by the usual method. I found the tumour occupying the whole of the antrum. The base of the skull was everywhere infiltrated. The tumour had passed into the right nose, and perforated the septum so as to extend into the left. It adhered to the septum around the sight of perforation. This was all removed, leaving a hole in the septum about the size of a florin. He went home within a fortnight. In a month the growth showed signs of return. It bulged through the incision and protruded upon the face. Dr. Woods saw him afterwards, as I had declared by letter that a further operation would be of no avail. The tumour had now almost closed the right eye. It was blue, tense, firm and lobulated, but it did not break. Dr. Woods reported the result of this visit to me and we agreed as to the prognosis. Early in October the patient

walked into my study after a visit to Dr. Woods. He looked better in health than I had ever seen him. The tumour had completely disappeared from the face and I could not identify any trace of it in the mouth. He said he had no pain of any kind. He could speak well when the opening remaining after the removal of the hard palate was plugged, and he was in town to have an obturator made. He has since gone home apparently well. He told me he had applied poultices of comfrey-root, and that the swelling had gradually disappeared. Now this was a case of which none of us had any doubt at all, and our first view was confirmed by the distinguished pathologist whom I had mentioned, and by our own observation at the time of the major operation. Here, then, was another surprise. I am satisfied as I can be of anything that the growth was malignant and of a bad type. Of course we know in the history of some tumours that growth is delayed, and that in the sarcomata recurrence is often late. But this is a case in which the recurrence occurred twice—the second time to an extreme degree, and yet this recurrent tumour had vanished. What has produced this atrophy and disappearance ? I do not know. I know nothing of the effects of comfrey

root, but I do not believe that it can remove a sarcomatous tumour. Of course the time that has so far elapsed is very short ; but that fact that this big recurrent tumour no longer exists—that it has not ulcerated or sloughed away, but simply with unbroken covering disappeared—is to me one of the greatest surprises and puzzles that I have met with.”

This case well illustrates one great barrier to progress in medicine. Somebody had evidently suggested the application of comfrey root for this case on the ground of having probably noticed it cure similar conditions. He did it for the same reason presumably as a tree-planter deposits an acorn in the earth ; the planter has seen as a result of such semination, an oak tree. No gardener would dream of supposing that the acorn was not large enough or strong enough to bring forth an oak tree ; nor would he question the fact that that acorn might possibly work along for perhaps the next five hundred years ; he is contented to rely upon his observation that it does so. What right, therefore, has Dr. Thomson to discard comfrey root as remedial in a sarcomatous tumour of bone ? The only evidence he has by him, on his own admission, is the best possible

proof of its having cured such ; and yet, with this as the sum and substance of his knowledge of comfrey root, his inference is that he does not believe that it can do so.

This is a capital instance of the reason why medicine—curative medicine, that is—is kept in the background. A hundred and twenty years before Dr. Thomson wrote on this subject we find the then great master of the surgical art, Mr. Percivall Pott, referring in an equally sceptical tone to the action of comfrey root in his celebrated article on “ The Palsy of the Lower Limbs,” in connection with curvature of the spine. The case was one in which Mr. Pott had diagnosed bony disease of the spine, and had applied a seton. Some weeks afterwards he met the patient walking along the street perfectly well. The patient had taken comfrey root and isinglass, which in his innocence he supposed had cured him, but Mr. Pott would have nothing of it. It could have been the seton, and only the seton !

The old woman who depends on her observation and discards theory, often succeeds when the skilled surgeon fails. Is it to be wondered at ? Her victory is not as attractive or as remunerative as his operation, but it is nevertheless far better for the patient.

Dr. Thomson's common sense leads him into direct opposition to his own observation ; were inquirers in other departments of human knowledge to act similarly, there would be little human knowledge worth having. The appeal to common sense is too often evidence of its dethronement.

It is common sense to suppose that diseased bone must always be removed ; I am fully convinced there is no greater error in surgery than this. A large sequestrum of necrosed bone has, I admit, to be removed in most cases, but certainly not in all, and carious bone need scarcely ever be removed if the case be properly treated.

A case that well illustrates this, was brought to me to the London Homœopathic Hospital, which will form—

CASE X., CARIOUS DISEASE OF THE TEMPORAL BONE, where two or three operations had been performed on a girl of about 18 years old, for the removal of diseased bone from the mastoid process, &c., of the temporal bone, at Charing Cross Hospital, and where the middle ear had been opened into ; further operation, which I understood to be proposed, would have meant

complete removal of the middle ear, and exposure of the cavity of the skull. In two or three weeks this case got very much better under *Calcaria carbonica*, 3rd dec., and a very diluted lotion of salufer (gr. ii.—℥viii.), and two years after, when she again came to the hospital, a scar could be seen where it was perfectly healed. Here, then, was a case where a large amount of carious bone was acting as an irritant, and yet became dispersed or absorbed through the natural activity of the tissues upon the adoption of a proper treatment.

Our Case No. II. illustrates the same fact.

CASE XI. COMPRESSION OF THE BRAIN.

Some twelve or fourteen years ago, the late Dr. Duncan Matheson asked me to see with him a gentleman who had fallen from his horse and was suffering from symptoms of compression of the brain, due to supposed fracture of the inner plate of the skull ; a portion of bone had been removed from behind the ear that was said to be pressing on the brain. Little or no relief followed, and a second operation was declared to be imperatively necessary by the best surgical advice procur-

able. Dr. Matheson and myself treated this gentleman for some weeks, with the result that he went back to Glasgow free from all the symptoms of compression, and his mind almost perfectly clear. The case was well known at the time, and will be recognised by the gentleman's friends. What became of the offending sequestrum, if such existed, I am not prepared to say ; all I can affirm is that medicinal remedies, *Lobelia inflata* chiefly, caused complete restoration of his mental state—a sufficient proof that we ought not to be in a hurry to operate.

CASE XII.—SUPPURATING KIDNEY OF THE LEFT
SIDE POSSIBLY FROM CALCULUS.

The following case has been seen recently by so many doctors, that some of them should they light upon these pages, may possibly recognise it from the description. Mrs. A., aged 41. Date of case, June 3, 1896 ; has just left University College Hospital, where it was proposed to incise the side and remove the kidney, or to drain off the accumulated pus, but this was given up on consultation ; consequently she was discharged from the hospital ; this was seven weeks back.

Before this she had been twice an in-patient of the Soho Hospital for Women, where the treatment proved equally unsatisfactory.

The family history of the patient is bad, for her grandfather died of cancer in the bladder, and his sister of cancer in the womb ; her father used to suffer severely from gall-stones when young, but is now alive and in fair health. Her mother had diabetes and Bright's disease. The patient herself has never been well ; all her life has had pains in the left side, coming in attacks with vomiting during which she is very flatulent.

A year and a half ago was operated upon for split perinæum, and after this her present sufferings developed ; these are — frightful pains in the region of the left kidney and the vagina, with smarting stinging, throbbing with great irritation both of the anus and vagina, worse before and after the period. Urination is very painful, as if something blocked ; at other times free, but nothing has been discovered at either University College Hospital or at Soho, beyond some dilatation of the urethra and prolapse of the bladder.

It was, however, thought by some that she had a calculus in the pelvis of the kidney.

Bowels were very confined, and has great smarting and bearing down at stool ; her eyes irritate, and black spots and flashes often come before her sight. Her sufferings quite incapacitate her for work. The urine is offensive, albuminous, loaded with pus, and of a specific gravity of 1015. Local examination fails to detect any enlargement of the kidney.

It is no exaggeration to say that this patient was literally left to die. It was not so much a case of being saved from operation, as one saved where operation was impossible.

It is unnecessary to dwell at length on her case, but a few reports may be given. On the date of coming, Wednesday, June 3, I gave her *Tropæolum majus* ϕ A. and on the 17th following she reported :—

“ Great improvement. Urine clear, and free from unpleasant odour.” For the first three days after my prescribing for her, she had three or four bad attacks of bearing down until the Friday, when the odour of the urine seemed to change, and from then steady improvement continued until yesterday, when another attack of bearing down came on but went away sooner than usual ; M. P. expected in three days. Spirits and ap-

petite much better ; still has cutting pain on defæcation, and anal irritation. Has not been sick, but still has pain in her side as if something were moving about.

The remedy was not repeated until July 12, when many of her symptoms returned. It was then again given, and subsequently *Arum maculatum*, *Iris fœtid.*, and *Solanum tabac.* at different times were given, without much apparent result, though with steady improvement. On January 6, 1897, she was complaining a good deal of depression and of local pains, and I then gave *Rubus fruticosus* ϕ A., with very pronounced improvement ; so much so, that on January 27 she reported herself well able to keep up during a hard day's washing, and to attend to arduous household duties of all kinds, and to be in the enjoyment of good spirits, and feeling in every way hopeful. She volunteered the statement that twelve months ago she had been lying on her back in bed, and suffering from intense pain.

The urine is not yet right, nor can she be considered cured, but she is very much improved, and has continued to get about and work hard almost from the commencement of my treatment.

CASE XIII.—UTERINE FIBROUS TUMOUR ON THE
RIGHT SIDE.

A lady under date February 18, 1896, writes from Southampton :—

“ My laundress, a very decent sort of person, whom I have known all my life, is in great trouble. She has been getting stout for about two years, and has been having occasional pains which she says reminded her of the time when she was having her family. She has been a widow for some years, and has three grown up children ; the illness has ceased for about two years. She has consulted Dr. ———, and he tells her she has a tumour and must go into the Infirmary for an operation ; but I thought I would write to you first, to know if you could do anything to prevent this operation, which the poor women dreads extremely. She also suffers from indigestion and general ill-health.”

On February 22, in reply to this letter, *Heliotrop. corymb. φA.* was given, and on Friday the 28th, came back the report :—“ I saw the laundress to-day. Her name is Mrs. S., she took the powder on Saturday and she seems a little brighter, not quite so depressed and less flatulent. She tells me she suffers from constipation

and never gets relief except from pills and other medicines. However, since she took the powder she has had one natural movement. I do hope she may do without an operation ; she fears it so much.”

March 6, report :—“ The laundress feels a little bit better, and it appears the obstruction, as she calls it, is less as she gets relief and passes water freely ; her face also looks more healthy. She still is an enormous size, though she fancies she has decreased a very little.”

May 16, report :—“ Mrs. S. looks pretty well. . . . The constipation has fully returned. She has no pain except that her feet and ankles swell at night and are then very painful. Looks smaller, specially in the region of the hips, but the constipation troubles her greatly. It is now three months ago since she took the medicine and certainly her life has been much happier for it. Also she is not now depressed.”

I followed up the same treatment, and towards the end of May called and saw the patient. She certainly had a large fibrous tumour on the right side that dragged upon the womb. As to her general condition the constipation was much better ; relief every second day. The indigestion and spasms had left and the water

was passing more freely. She had no local pain except that caused by the dragging of the tumour, and even this is less than it used to be. She continues to work hard at washing and ironing, and after a day's hard work her feet and ankles swell and her back aches, but still she can do her work well which she had had to discontinue. She feels heavy and sleepy every morning and evening, and her eyelids are heavy, with a difficulty in opening them on getting up in the morning.

The subsequent treatment of her case involved the giving of *Punica gran. φA.*, *Lactuca virosa φA.*, *Helleb. nig. φA.*, and a report on August 7 runs thus :—" Feeling pretty well generally, but complaining of pains in her back by night and pains in her head by day."

For these pains *Arbutus andrachne φA.* was given, and evidently with relief.

Here, then, is another instance of a woman on the eve of a serious operation being saved by the timely administration of a few appropriate doses of medicine. That there might be no mistake about her case I wrote to the lady interested in her, and received on February 16, 1897, this report :—" Mrs. S. looks better, and has no constipation, but she is not any smaller, and she says

her waist increases in size, so that all her bands are very tight.” And the letter goes on to say :—“ I do not imagine the case to be absolutely finished.” It is not, of course, to be wondered at that there still should exist in this case considerable swelling, seeing that she has had no medicine, and I had received no report of her from the August of 1896 to the above date in February, 1897. The point about her case is that treatment has rendered her condition altogether more bearable, and it is not too much to say that had I been more regularly communicated with, the size of the tumour would have been by this time diminished. This I consider very good work for one year, during half of which time she has not had any medicine from me, simply because her suffering was not in her opinion sufficient to require it. A foolish idea, of course, but still this is the fact.

The money of charity is being lavishly expended in the treatment of cases such as these ; to say the least, it is worth consideration whether the enormous expenditure in our Hospitals might not be curtailed by the adoption of more simple and efficacious prescription for Chronic Disease while patients are in their own home. At all events, philanthropists might do worse than

look into it. While writing, these figures in the *Daily Graphic*, February 9, 1897, an unfortunate child, who anæstheticised, of course, is having its body extended forcibly for Pott's curvature of the spine, surrounded by three doctors and three nurses. Anyone who has had experience of the action of remedies such as Calc. C., Silicea, Symphytum off., Sanguinaria, Assa-foetida, &c., will bear me out in saying that 99 out of every 100 of such cases are far more curable by these remedies, if well indicated, than by all the systems of Extension in the world. The indicated remedy will not call into requisition the services of six attendants, and therefore is not sufficiently attractive for the *Daily Graphic* ; it creates no stir and may be said to depend upon the patient merit that take spurns of the unworthy ; but it nevertheless is not to be despised.

CASE XIV.—TUMOUR PRESSING UPON THE BLADDER.

The next case is one in which the patient is still an invalid, although great relief has been obtained from medicines.

Mrs. —, aged 67, of dark hair and dark skin.

About February, 1895, she complained of dysuria, catheterisation had to be resorted to, and the doctor attending noticed a mechanical obstruction. This was afterwards diagnosed as a tumour pressing upon the bladder, and the active straining caused blockage of the passage. After some weeks she went to the Samaritan Hospital in London, where an operation was consulted about, but given up as not likely to prove successful. By some who then saw her the tumour was declared to be cancerous, but this probably was not the case.

A lady interested in this poor woman writes to me that the water has to be drawn off regularly, and there is no movement of the bowels except from medicine. She suffers from many uncomfortable sensations ; a little chill causes inflammation of the bladder. The time is much spent in lying down ; gets up the latter part of the day, but is never easy except in bed. Fresh air in a bath-chair has been recommended, but the motion aggravates, and consequently is seldom used. She can only walk a short distance and very slowly, and then is glad to get to bed again. I took in hand the treatment of

this case by letter on June 3, 1896, and from this date to the November following the remedies given were, *Cactus grandiflorus* ϕ A. *Ferrum picricum* 3x, *Heliotrop. Corym* ϕ A., *Dictamnus Alb.* ϕ A., *Sedum teleph.* ϕ A., *Calcarea carb.* CC.

On November 11 this report came in :—" In reference to Mrs. S.'s case there seems to be a steady improvement in her health. She now can walk a mile out and rest, and a mile home. It tries her but does not injure. She cannot say there is any improvement in urination, she still has to use her instruments. Sometimes she can insert them more easily, and then again, she cannot say it is really so. She has not had one attack of inflammation during the last month." The beneficial result of treatment is therefore apparent, although the tumour remains ; there is reason to think, too, that this is decreasing in size, but without any such assumption the circumstances are sufficiently important for publication. Up to the time of writing report shows steady improvement.

APPENDIX.

SYSTEMATIC PROGRESS IN MEDICINE.

REGULATED DOSING AND DRUG PROVING—A PLEA

FOR UNIT PROVINGS.

BY ROBERT T. COOPER, M.A., M.D.

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THE benefits derived by scientific medicine from the innovations of Hahnemann, without, I think, a single exception, can be referred to his having systematically laid down the principles upon which progress in medicine should proceed, the science of which has subsequently been highly enriched by such progress. He, so to speak, “ gave the route ” to those who wished to proceed along a road that was undeviating and clear, and that led to the wished-for termination. In this way true progress was brought about by this great reformer in medicine, and his method of procedure ought to be imitated by his followers when they strive to add to the immense advantages already secured.

My own conviction is that Hahnemann had it in his

power to have removed many of the obscurities that have since his time hampered homœopathy, and that he did not consider it possible in the then state of medical opinion to do so ; this however, is simply an individual expression of opinion, and touches upon a subject that must be left for future discussion.

The important point to consider is the position of homœopathy at the present time, as a system of medicine, in regard especially to some of these obscurities. In order to do this, I purpose to take as the exponent of this position the paper read at the International Homœopathic Convention, on “ A Posological Law,” by Dr. V. L. Simon,* the well-known consulting physician of Paris.

It is begging the question to say, as it is possible some in argument may do, that this essay of Dr. Simon's is not a representative paper ; it was accepted as such by those who spoke upon it before I myself had the pleasure of doing, at the Congress ; or, to be precise, there was nothing in what those who succeeded me in the discussion said to hint at its being other than representative of modern homœopathic opinion.

* “ Transactions of the International Homœopathic Congress,” London, Adlard & Son, 1896. Section, Essays and Communications, p. 127.

This paper involves the idea of systematising our doses and systematising our provings, most important subjects of consideration, and ones that have long been *Quæstiones Vexatæ* amongst us. It is upon these subjects I wish to dilate at present. To begin with, Dr. Simon tells us that, “ according to the acknowledgment of one of Hahnemann's favourite disciples, the problem of posology has been badly stated in its fundamental principles ; ” a statement with which it is impossible to cavil. Nothing can be more true ; time after time homœopathic practitioners have met and discussed this subject of the dose ; and that they have stated the problem badly in its very fundamental principles is obviously true ; the only thing to consider is whether there is any sign of their amending their ways, and for this we naturally turn to Dr. Simon's own essay. On the same, the first, page, the statement meets us, in the third and fourth lines : “ All doses are good, provided one knows how to give them at the right time ; ” than which I hardly think it possible to write anything more obscure or more misleading ; and as if this were not sufficiently involved, we find the query in the order of business of the meeting, and for which

Dr. Simon is not, I imagine, accountable : “ Have we here or elsewhere a law of dose ? ” Not, be it remembered, of *a* dose, or *the* dose, or of *any* dose, but simply of *Dose*, as if there existed an abstract entity termed dose, for which we required a law. Surely our language must be more definite and accurate, or it is hopeless to attempt to evolve perspicuity from all this confusion.

Dr. Simon, in the essay before us, falls into this error from not following out his own dictum and stating the problem of dose clearly ; the term Posological Law gives us no insight as to whether one or many doses is under discussion, and the term, “ a law of dose,” is equally if not more vague. The beginning and the end of the paper give us to suppose that many doses are meant, as is evident from the statement just quoted : “ All doses are good,” &c. ; and, towards the end of the paper, from his making no distinction between one single dose and a series of doses ; while confusion is still further increased by the information vouchsafed that the law formulated by him concerns the drug only, as if the very word dose did not suppose the existence of drugs, patient and disease.

This mode of dealing with the matter is not peculiar to Dr. Simon ; it is simply characteristic of the confusion that exists ; it is in the hope of being able to unravel the intricacies of the problem of the dose that I enter into this inquiry, which is intended as an extension of the work done in the essays published by me on “ Arborivital Medicine ” in THE HAHNEMANNIAN MONTHLY of January, &c., 1893, and on “ The Dose-Frequency Law,” March, 1893, and “ One Dose, One Value,” February, 1893, besides other papers, in *The Homœopathic World*.

Before it is possible to formulate a dose law—a posological law, if you will—it must be clearly understood what is meant by the term dose.

For myself, I know of but three forms of dose ; that is to say, of curative dose, viz., the allopathic and the homœopathic and that brought forward by myself, and of course, much less known, the arborivital dose. Leaving aside this last for the moment, let us inquire as to the former. Without being defined in so many words, the Allopathic Dose, as set forth in treatises of *materia medica* or of *posology* in the allopathic school, may be defined as the greatest quantity of a drug that can be given, short of producing poisonous effect. This defini-

tion is not alone defensible, but is strictly in accordance with facts ; thus, when the allopathic examiner requires of a student the dose of arsenic or of antimony, he is not satisfied unless an answer comes back that is near to, but not very far below what would ordinarily be a dangerous dose.

It would occupy too much space to follow out the proof of the correctness of this definition, for which I hold myself accountable, and the necessity for which is plainly evidenced by Dr. Simon when he says that the dose of a homœopathic medicine should be proportioned to that which produces in a healthy man the group of symptoms which we wish to cure.

If this be indeed the correct homœopathic dose, our system is becoming nothing more than a reversion to allopathy ; and he goes on to say, that “ the therapeutic dose should be like the pathogenetic dose, with this restriction, that the first ought always to be lower than the second.”

Dr. Simon here employs the term “ pathogenetic ” in the sense in which it is used by many other homœopathic practitioners, but which I protest against ; namely, to mean that certain quantities of drugs (doses) produce

abnormal symptoms in a fairly uniform manner upon the healthy ; there are doses that most certainly do so, but we are not in need of a coined word for such an action, the proper and unmistakable adjective to apply to such quantity is that of “ poisonous.” No good can be gained by cloaking the reality in such a specious term as “ pathogenetic.” I do not know any reasonable objection to the use of the word poisonous, but if objection there be, then let us choose a word taken from the domain of allopathy and use the term “ physiological.”

The term “ pathogenetic ” is the creation of homœopathy, and is meant to be descriptive of facts revealed by homœopathy ; it ought therefore to be restricted to the effects that ensue from infinitesimal and not from material doses upon the healthy.

Infinitesimal doses are known to disturb the healthy human system at times very remarkably, but seeing there is no uniformity about this disturbance, and that it is largely dependent upon the idiosyncrasy of the person experimented upon, there would be no justification for the application of the term “ poisonous ” to this action, and every reason why that of pathogenetic should be employed. It is a good old homœopathic word meant to

refer to the great homœopathic truth ; that provings ought to be undertaken before remedies are given to the sick, and that small doses act upon the healthy as well as in disease.

Having defined an allopathic dose, it will be perfectly evident that it is impossible to formulate any law of the dose in accordance with this definition. For the idea here has to do with quantity, and quantity alone, and this quantity is ever shifting, and is directed to the protection from injury to the patient as much as to the cure of his disease. Therefore, whatever the law of the dose may be, it is evident the law cannot have reference to the quantity of the dose, if by the term dose we mean an allopathic dose.

Next let us consider the Homœopathic Dose. Writers have been so shifty in their way of expressing themselves in regard to a homœopathic dose that though the term is often used, it has never, that I know of, been defined. The term homœopathic dose is vaguely connected with something extremely minute, infinitesimal in fact, but almost all advocates of homœopathy, Dr. Simon included, wish the term to have reference not alone to infinitesimal but to widely different quantities of drugs. No progress

therefore can be possible without a definition, and my definition is this : A homœopathic dose is the smallest quantity of a drug by which a cure of a disease can be effected.

As, however, opinions differ widely as to what this least quantity is, a difference arising not alone from the nature of the drug, but from the nature of the disease as well, it is evident that no law can be formulated having reference to quantity for this homœopathic dose, any more than for the allopathic dose.

The fact is we have to consider not alone the question of quantity, which is obviously a shifting basis, but as well the question of the disease, which also is ever varying, often intangible, and subject to all kinds of irregularities.

If, therefore, we are to proceed with advantage, we must curtail, circumscribe, and, as far as the nature of things will allow, isolate the basis upon which a law ought, so to speak, to be erected.

A law, then, can not advantageously or correctly be formulated, for an allopathic dose or for a homœopathic dose.

We are therefore driven to inquire whether a law can be framed for the third kind of dose, the Arborivital.

But before proceeding, it is necessary to keep clearly in mind what is meant by the abstract term “ dose,” apart from such qualifying terms as allopathic, homœopathic, or arborivital. By “ dose ” I mean a portion of a drug given with beneficial intent in disease. The dose then, in this sense, relates only to the alleviation or cure of disease. As yet there has been no intention of dealing with the pathogenetic dose, *i.e.*, a dose given with disease-producing intent, a law for a disease-producing dose is, for the present, not under consideration.

The dose for which a law is in demand must be given with direct or indirect curative intent. Our object obviously in framing a law is to render the dose curative, the requirement is to start with certainty of what is to follow when treating disease.

What is an Arborivital Dose ?

It is simply a single drop of the preserved juice of a fresh plant that is allowed to expend its action till no evidence is forthcoming of this action.

The basis of this dose, therefore, and on which it is proposed to formulate a law, is stationary ; the quantity

is sufficiently unvarying for our purpose. The difficulty therefore of quantity is overcome ; in this important particular the arborivital dose meets requirements.

But the term dose necessarily implies not alone the quantity of the medicinal agent, but in practice connects itself with the disease and with the patient.

Now disease is divisible into two great classes, acute disease and chronic disease : the first instable, varying and attended with urgency ; its tendency is to be immediately dangerous to life.

Chronic disease, on the contrary, is fairly stable, little varying, and not attended with immediate urgency.

I hold that we cannot stand by and watch the progress of cases of acute diseases running a course untreated. It is cruel, it is unjustifiable ; so that when Dr. Conrad Wesselhoeft in the *Hahnemannian Monthly* for August, 1896, in his paper on “ Solutions of Questions of Science,” states that , “ In order to prove that a case has been cured by medicine, it is first to be shown conclusively that the case could not have recovered or have been shortened without the use of medicine,” he lays down conditions obtainable only in respect of chronic disease ; and when he goes on to

say : “ Let it be resolved or ordered by this Institute ” (the National Medical Conference, Detroit, June 16, 1896), “ for instance, that all or a certain class of acute cases, say pneumonia or typhoids in these hospitals (homœopathic hospitals), should be observed for several years without any medicine whatever,” he proposes an amount of cruelty perfectly unjustifiable ; for even in the present allopathic treatment of acute disease, symptoms are being relieved by medicinal treatment, and far less questionable proceedings prevail in the ordinary hospitals than in Hahnemann's time. As long as urgency exists, disease cannot remain untreated ; in fact, the English law condemns as criminals the members of the Peculiar People, a sect that prevails very largely in the county of Essex, for leaving their children to go untreated.

But besides this, the time it will take to procure “ a fair number of hundreds ” of well - reported cases of pneumonia and typhoid fever to meet requirements, will certainly extend to the termination of another century.

The arborivital dose, as originally suggested by me, had reference to chronic disease, the intention being to

test the power of such single dose in diseases unattended with any great urgency ; in other words, not likely to be immediately fatal.

Working with such a dose, undiluted and undynamized, upon this class of disease, I found results far more satisfactory than had hitherto been suspected, and consequently I was enabled to formulate a law agreeably with the facts observed.

This law is what I have termed the Dose-Frequency Law, and may be thus expressed : In expending its action upon disease the curative dose requires time to act proportionately to the duration of the disease, modified somewhat by the age of the patient ; or, as I have expressed it : “ The true curative principle of a drug when administered requires to be given in single dose, and this dose must be repeated in a measure proportionate to the duration of the disease ” (*vide Homœopathic World*, March, 1893, p. 119).

The true law of the dose has reference, therefore, in the first place, to the frequency of repetition, and not to the quantity of the drug. Dr. Léon Simon's essay proves very clearly that any law of the dose founded upon quantity is defective : for, after formulating such

a law, he himself admits that “ the preceding rule,” or, as he in another place terms it, “ posological law, concerns the drug only,” and rightly acknowledges that this is a deficiency.

The object of having a law of the dose is to point out the reciprocal relationship between the dose and the disease upon which it has to act, and this desideratum is most certainly met by the dose-frequency law ; it is not met by any other law of the dose that I know of.

The idea underlying the term arborivital dose is that, quite apart from succession and dilution, there is a power in plant remedies which will carry on its action over a considerable period of time, and that this power is not to be measured by the quantity of material in the dose, but that it is brought into demonstrable activity by a reciprocal influence existing between the drug and the disease.

Proof of this was furnished in a pamphlet published by me on Arborivital Medicine,* as well as in other works.

* *Arborivital Medicine*. John Bale & Sons. London. 1896. Where a case of vascular deafness is given that would certainly have proved incurable with repeated doses of the remedy employed, namely, atropa belladonna, and that was cured with an arborivital dose.

But it is evident that there is developed in dry, lifeless, and apparently inert substances a power unsuspected until Hahnemann's time, the existence of which has since then been acknowledged by thousands of medical observers.

It has also been widely observed that single doses of these specially prepared dynamized remedies of Hahnemann exert a powerful effect in disease ; my conviction is that they are in fact units of force complete in themselves, and that from these units result the truest and most direct cures of disease.

It is evident that single doses of drugs that are dynamized act conformably with the law expressed regarding the arborivital dose. In fact, it is possible to formulate a law in reference to the unit dose, and the unit dose only, included in which is, as explained, the arborivital dose.

Thus far I have dealt with the dose in regard to its agency in controlling disease ; but it is evident that the term dose is applied to a disease producing factor, as well as to that of a disease benefitting one. Considering the importance of our provings or pathogeneses, it is very desirable that attention be paid to this aspect of

the question. Here, as before stated, it is less necessary to formulate a dose law ; a law was required where a difficulty existed, the difficulty being the cure of chronic disease.

No law is required where no difficulty exists, and there is practically no difficulty in producing disease.

The difficulty is in producing abnormal symptoms, or actual disease, in a way that while not permanently hurtful to the person voluntarily submitting to be experimented upon, will, all the same, furnish facts easily available as indications for the treatment of disease. Obviously in this connection the meaning attachable to the term dose becomes completely changed ; the dose now being that portion of a drug that is given with the object of producing disease, or symptoms that are not the usual accompaniments of health.

Our object is to render the dose usefully pathogenetic, and no attempt at certainty of result is made.

The point to be investigated is the systematizing of the results of our methods of dosing, so that our provings may represent accurate knowledge of drug-action.

The dose now is of subordinate importance, for it may or it may not be followed by symptoms ; we, in fact,

start with uncertainty, and the important matter is not the dose, but our method of dosing.

The act of dosing of the healthy body, if followed by abnormal symptoms, constitutes a proving ; and that form of proving that is followed by the clearest medicinal symptoms is the most useful for furnishing indications for use in disease.

Provings, it is obvious, may be undertaken with material doses of drugs, and which will include accidental and suicidal poisonings, or heroic voluntary experiments, the doses being single or frequently repeated. To such provings as these I propose the term *Venenum Provings*, the ordinary term poisoning being insufficient or objectionable ; or provings may be undertaken with infinitesimal doses, where also the doses may be repeated or single, and to these I would give simply the term *Homœopathic Provings*, a homœopathic dose being one, in this connection, that has no demonstrable material. Or provings may be undertaken with single doses only of drugs, in which case I would apply the term *Unit Provings*.

Experiment has taught us that provings may be obtained from every method of dosing, whether the dosing

be by quick succession of doses, doses at long intervals, or by single doses. This was known before the introduction of homœopathy, and this possibility is recognised in our first form of proving, the *venenum* proving.

But homœopathy has revealed the fact that whether given singly or in succession, the minutest possible particles of substances, if in a state of special preparation, may produce pathogenetic effects, these effects being consequent upon the mode of preparation. Hence the term homœopathic is associated with these facts, and is applicable to our second form of proving.

The unit proving not alone meets the fact revealed in homœopathy, that minute single doses of specially prepared substances may be followed by abnormal symptoms, but it meets the great fact insisted upon by myself, that single drops of living plants, not subjected to any special preparation, are often followed by great and beneficial change in the human body not obtainable in any other way ; this change being obviously brought about by a hidden power possessed by the plant itself, and which I presume to be the growth-force of

the plant, or which, if thought more desirable, may be denominated plant-force.

The necessity, therefore, for the unit proving is obvious ; it requires our dynamised drugs to be proved in a way different from what has hitherto prevailed, viz., from beginning to end in single doses only, and it demands a change in our method of proving undynamized plant remedies. In this way it adds new pathogenetic procedures without in any way interfering with the methods hitherto adopted.

How frequently these unit doses are to be repeated will depend upon the preliminary “ Aggravation,” or, as I would term it, the Preliminary or *Curative Thrill*, the term aggravation being most misleading. Thus Dr. Simon states at pages 7 and 8 of his essay : “ There are some substances which give rise to the same train of symptoms in whatever quantity they are given. In these the choice of the dose is of less consequence ; it is of paramount importance to avoid perturbing effects, what in our school we call 'aggravations.' ”

To my mind the preliminary thrill ought to be sought for in all cases of chronic disease, and our dose should be so adjusted as to allow this disturbance to expend

itself. Dr. Simon evidently had in his mind the pernicious aggravation of allopathy, and not the curative aggravation, as it is understood in our school of medicine and he thus makes an error by no means an uncommon one. The possibility of misconception justifies a correction in our language ; and, besides, the term “ Aggravation ” can have no application to the production of abnormal symptoms in health ; in fact, no pathogenetic application.

In many instances, as can readily be supposed, no appreciable effects will follow from a single dose ; and though in such cases it is not desirable to give a second dose of the same drug within a short interval, a week should elapse before a second one is partaken of ; while, should distinctly medicinal symptoms proceed from the first dose, these disturbances, constituting now the pathogenetic thrill, ought to be allowed to exhaust themselves before any further experiment is made upon the same patient.

Many reputable homœopathic practitioners have testified to the unmistakable benefits that are to be gained by single doses of drugs in disease. It is due to them, if for no other reason, that systematic experiments should be

undertaken, so that we can make trials on the healthy in uniformity with their clinical experiences.

With reference to the effects of drugs in chronic disease, my own conviction, and in this I am by no means alone, is that the indicated dose very soon gives evidence of recognizable curative power, and that a dose that furnishes this evidence ought never to be interfered with until all signs of its action have vanished, not even by successive doses of the same drug, much less by doses of other drugs ; and that in this way it is possible to obtain unmistakable evidence in clinical practice of true curative action.

If this be true, it will follow that it is simply imperative that these unit doses should be proved in health in a way commensurate with their importance ; hence the necessity for the unit proving.

The venenum provings furnish very few reliable indications for the prescription of remedies, at all events in chronic disease. A large amount of any indigestible substance may upset the stomach, but it does not follow that the resulting indigestion symptoms are characteristic of the true “ *inwardness*” of action of the drug.

Poisonings by large quantities, in single doses, of carbolic acid, of chloroform, and by ether, are matters of daily occurrence, but I have yet to learn that reliable indications for obtaining the true curative action of these drugs in disease have thus far been obtained in this way ; so that unless the single dose is one small enough not to corrode the *primæ viæ* or otherwise alter the constituents of the digestive juices, or at once to vitiate the fluids of the body, the immediately developed symptoms must be doubtful representatives of the drug's true dynamic energies.

It is different when successive fairly large doses are given to the healthy ; but besides the difficulty of getting anybody to submit to provings that are leading to the gradual infection of the system by material particles of hurtful drugs, there is the objection that the doses succeeding the first ones may divert or symptomatically alter the disturbances that these first ones had set a-going.

To develop gross pathological change in the healthy, rapidly succeeding material doses may be necessary ; but surely, symptoms, before they can be recognised as abnormal, must be diagnosed as such, and diagnosis

ought as easily to determine whether they are, or are not, prodromic of a tissue change.

Even should a drug produce gross pathological change, further study in the form of clinical investigation will have to be made use of to show that this change of structure constitutes an indication for the prescription of the drug to the afflicted ; and the same applies to mere symptoms if produced in the healthy ; a further study of these, in disease, is required to confirm their utility.

Let us clearly understand the position ; the most important thing to be aimed at in proving medicines is a precise and extensive knowledge of the true *Curative Action of Drugs* ; this curative action, an action disproportionate to a drug's material particles, was unsuspected before Hahnemann's time, and it is that upon which Hahnemann lays such stress throughout his writings, and which is of such exceeding use to us in effecting the complete elimination of chronic disease.

As regards this curative action, it is important to keep in mind the multiplicity of the manifestations of this power, and that its prolonged efficacy as a curative agent, when once set a-going in the system, cannot be gauged by the mere amount of material

instilled into the system. This has been proved repeatedly, and is acknowledged by Dr. Simon in his quotation from Attomyr ; thus Simon states : “ Attomyr has well expressed the defects of this method of viewing the question : ' Above all, we have been at great pains to determine what is a strong or a weak dose, and our labour has resulted in nothing. We have been all astray in our interpretation of the various actions of high and low dilutions, in saying that the difference consisted in strength or weakness. Therapeutics, in fact, has no concern in distinguishing between doses that are *strong* and doses that are *weak*, for through our knowledge of the law of similars, we know that disease does not call for *strong or weak* doses to correspond with its own strength or weakness, we have recognised that we have been going the wrong way to work, and that the numerous discussions in which we are occupied leave still undecided the question whether the thirtieth dilution is more, or less energetic than the third.' ”

This statement of Attomyr's is, I need hardly say, most important, and entirely in accordance with facts.

We get into hopeless confusion without keeping this

in mind, and Dr. Simon's law cannot possibly apply to the manifestations of this power, seeing how independent the power is declared to be of material. The disproportion between the manifestations of this power and its subtending envelope, both in health and in disease, has been proved beyond question by the Homœopathic School.

But not alone is this curative power remarkable for its intensity, but as well for the considerable time it occupies in manifesting its agency when working upon disease.

It is this duration of its action, upon which, more particularly, little or no light has been thrown since Hahnemann's time.

Hahnemann states that belladonna, for instance, acts from one day to eighteen months, and he probably meant that it acts both in disease and in health for this period, but whether this be his meaning or not, there have been no systematic experiments that I know of to determine either whether this great duration of the action of drugs applies only to health, or whether drugs continue to act over such a long period in disease.

My own feeling is that the working duration of the

true curative action is determinable by the nature of the disease upon which a drug exerts its power and the length of time during which this disease had existed, and that when we find a very prolonged action in an apparently healthy person, to follow from the administration of a single dose, the unusual lengthening out of this action is due to the presence of hidden but undiagnosable disease existing in the supposed healthy person.

Whether right or wrong in my surmise, one thing is perfectly certain, that the prolongation of the action of drugs, whether it be due to the properties that single doses possess, of disturbing for a long period the perfectly healthy organism, or to a reciprocal relationship between disease already implanted in the system and the drug that is given, can only be determined by systematically undertaken UNIT PROVINGS.